ABSTRACT OF THE DISCLOSURE

The present invention relates to the treatment of dopamine-related dysfunction using full D_1 dopamine receptor agonists in an intermittent dosing protocol with a short, but essential, "off-period." The D_1 agonist concentration is reduced during the "off-period" to obtain a plasma concentration of agonist that suboptimally activates D_1 dopamine receptors for a period of time to prevent induction of tolerance. Specifically, the method comprises the steps of periodically administering to a patient a full D_1 agonist with a half-life of up to about 6 hours at a dose resulting in a first plasma concentration of agonist capable of activating D_1 dopamine receptors to produce a therapeutic effect. The dose is reduced at least once every 24 hours to obtain a second lower plasma concentration of agonist that results in suboptimal activation of D_1 dopamine receptors for a period of time sufficient to prevent induction of tolerance.